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CONFIRMATION NO. 3484

SERIAL NUMBER 10/786,132	FILING OR 371(c) DATE 02/26/2004 RULE	CLASS 455	GROUP ART UNIT 2617	ATTORNEY DOCKET NO. CING02-108
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APPLICANTS

Daryl Gazzard, Alpharetta, GA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 05/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GA	12	21	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

64952

TITLE

SYSTEM AND METHOD FOR WIRELESS CALL HANDOVER FROM A SHARED NETWORK TO A HOME NETWORK

FILING FEE RECEIVED 874	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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